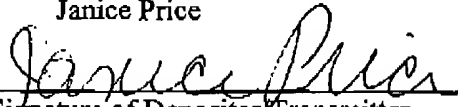


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|--|--------------------------------|--|---------------------------|
| CERTIFICATE OF TRANSMISSION (37 CFR 1.8) Applicant(s): Douglas W. Versaw | | | Atty Docket No. 404082 |
| Application No. 09/637,806 | Filing Date August 11, 2000 | Examiner Boehler, Anne Marie M. | Group Art Unit 3611 |
| Title: MOTORCYCLE TRAILER HITCH | | | |
| Date of Transmittal: <u>January 19, 2005</u> | | | |
| I hereby certify that the following documents: | | | |
| <ol style="list-style-type: none">1. Transmittal Form SB/21 (1 page)2. Petition for Extension of Time (1 page, in duplicate)3. Amendment (8 pages)4. Fax Cover Sheet (1 page) | | | |
| are being transmitted via facsimile number 703-872-9306 to Group No. 3611, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313- 1450, on the date indicated above. | | | |
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| TRANSMITTAL FORM (to be used for all correspondence after initial filing) | Application Number | 09/637,806 |
| | Filing Date | August 11, 2000 |
| | First Named Inventor | Douglas W. Versaw |
| | Art Unit | 3611 |
| | Examiner Name | Boehler, Anne Marie M |
| Total Number of Pages in This Submission | Attorney Docket Number | 404082 |

| ENCLOSURES (check all that apply) | | |
|---|--|--|
| <input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Certificate of Facsimile Transmission (1 page) Fax cover sheet (1page) |
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| Firm | Lathrop & Gage L.C. | | |
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| Printed Name | Dan Cleveland, Jr. | | |
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